

Victims Compensation Quarterly

Dedicated to Providing Compassionate Services to our Constituents

GANG VIOLENCE IS DEVASTATING

A Unique Program Provides Assistance

There are currently over 400 gangs in Orange County with over 25,000 members.

In October 1990, the Gang Victim Services Program (Program) was established as a speciality unit within the Orange County Victim/Witness Assistance Program to help victims and their families cope with the devastating effects of gang violence. Last year, over **1,100** victims of gang violence received assistance from the Program. Since the Program's inception, it has assisted the families of more than **390** victims who were killed by gang members.

This nonprofit organization is funded by state and federal grants. It is staffed with six Victim Specialists who provide 24-hour crisis intervention and assistance to victims and their families. The Program's Supervisor, **Christine Lopez**, is nationally renowned for her expertise in gang related victim-witness issues. Recognizing the broad needs of victims, all staff receive extensive training in the areas of victim support and counseling.



Services provided by the Program include:

- *Responding to crime scenes with the police;*
- *Providing referrals to agencies that assist victims and their families;*
- *Recovering personal items found on victims' bodies;*
- *Assisting families with funeral arrangements;*
- *Providing translation services;*
- *Arranging mental health counseling services for victims and their families and providing guidance through the legal process.*

Various law enforcement agencies depend on the Program's staff to assist with death notifications and crisis intervention. These include police departments in Santa Ana, Anaheim, Westminster, and the Orange County Sheriff's and District Attorney's Offices. Support groups have been organized to help family members cope with the loss of loved ones and for gunshot victims who became quadriplegic.

The Program's staff also work with witnesses, both children and adults, to encourage them to talk to the police. Although many witnesses fear retribution from gang members, the Program's staff is often successful in persuading witnesses to provide information and testify in court.

Due to the outstanding success of this Program, it is being used as a model by the U.S. Department of Justice for the establishment of similar services nationwide. At a ceremony in Washington D.C. on April 17, 1997, Attorney

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NOVA CONFERENCE IN LOS ANGELES

AUGUST 29 - SEPTEMBER 3, 1999

Consistent with the goals and objectives of the Board's Strategic Plan to develop and strengthen partnerships with those who serve victims, numerous Board staff will attend the Twenty-Fifth Annual National Organization for Victim Assistance (NOVA) conference. The theme of this year's conference is:

Victim Assistance: Moving Toward the Next Millennium

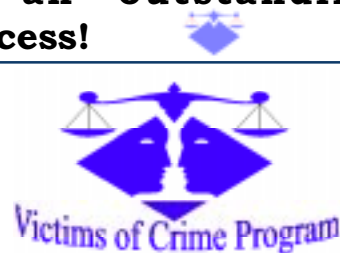
The conference will update Board staff on the types of services and benefits available to victims **nationwide**. It will be an excellent opportunity for **Information Sharing** and further enhancing the victim services network.

The VOCP's Quality Assurance Mental Health (QAMH) unit will be conducting a workshop that explains the need for quality assurance in mental health treatment and how such standards should be implemented.

Participating in this workshop will be **David Chadwick, M.D., Michelle Winterstein, Ph.D., Carol Wood, Ph.D.**, the VOCP's consulting psychologist, **James Kent, Ph.D.**, and **Afzal Rashid**, Manager of QAMH.

The interaction of Board staff with the various victim service organizations will build collaborative working relationships that will strengthen and improve services to victims.

This event promises to be an outstanding success!



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NEW PROCESS FOR DERIVATIVE VICTIM APPLICATIONS

Approximately 40% of derivative victim claims never have expenses submitted for reimbursement.

These claims generate a large workload for both VOCP and Victim/Witness Assistance Center staff. In order to make more effective use of staff resources, new policies and procedures were developed to allow eligible derivative victims to meet the applicable statutory claim-filing deadline without the necessity of filing standard applications on which no bills may ever be submitted for reimbursement.

Regulations that specify the conditions under which the filing deadline for derivative victims may be “tolled” were adopted by the Board, approved by the Office of Administrative Law, and became effective on November 2, 1998.

The Board has revised its Regular application and developed a new Derivative Victim Identification Form (Form) for this process. When a direct victim, or a derivative victim of a deceased or minor victim, files a VOCP Regular application, he or she may list associated derivative victims in Section 6 of the Regular application, and on the Form.

To ensure that the filing deadline for identified derivative victims can be satisfied and a claim subsequently established

when expenses have been incurred, the following information must be provided for each derivative victim, within the filing deadline:

- The name of the person providing the derivative victim information, and their claim number (if the claim file is already established);
- The date of the qualifying crime;
- The signature of the person providing the derivative victim information;
- The derivative victim’s full name, social security number, birth date, mailing address, relationship to the victim, and gender;
- The date the form was signed.

The filing deadline for the identified derivative victims will be “tolled” if the specified derivative victim information is submitted on the Form within the applicable filing deadline.

Forms will not be accepted after the applicable filing deadline, unless accompanied by a late application filed by a direct victim, or a derivative victim of a deceased or minor victim.

Persons providing derivative victim information will receive a letter that will:

- Acknowledge receipt of their application, acceptance

of their late claim, or receipt of the Form, as appropriate;

- Explain the procedures to be followed to initiate a derivative victim application when eligible expenses are incurred or are imminent;
- Acknowledge receipt of derivative victim information;
- Advise the direct victim that the derivative victims may contact VOCP or their local Victim Witness Assistance Center for help in completing the application;
- Advise them that they may complete and submit the Form within the filing deadline, to “toll” the filing deadline for additional derivative victims.

When derivative victim information is received, it will be entered into the VOCP’s computer system. If the information is complete, and it was filed on a timely basis, or if the Board accepts the late application, the filing deadlines for the identified derivative victims will be considered to have been met.

This will allow derivative victims to file applications at any time thereafter when they incur out-of-pocket, crime-related expenses, or when such expenses are imminent.

It is important to note that there is nothing to prohibit a derivative victim from filing an application prior to the filing

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NEW STRATEGIC PLAN

On May 12, Board management officially announced the revision/ updating of the Board's Strategic Business Plan (Plan). Accomplished after six months of work by management and employees, the new Plan features new vision and mission statements, four broad goals, thirteen specific objectives within those goals, and a statement of the Board's core values. Here are some of the Plan's components:

Vision Statement

The State Board of Control is recognized for its outstanding customer service in providing appropriate restitution for victims who are harmed by certain criminal or State government activity.

Mission Statement

The mission of the State Board of Control is to obtain restitution and provide qualified financial assistance to the victims of certain criminal or State government activities, in collaboration with other governmental agencies, advocates, and service providers.

Goals

- Maximize revenue and optimize the return on investment for all activities to ensure continuous fiscal opportunities and stability;
- Build an environment that promotes and maximizes access to Board services;
- Continuously improve Board processes by optimizing efficiency and effectiveness,

recognizing that quality customer service is our priority;

- Provide an environment that promotes and supports continuous learning for sound decision making.

Objectives

- Develop an infrastructure that supports the goals, objectives, and operations of the Board and its customers;
- Develop a public relations and communications plan outlining a coordinated strategy for outreach through 2002;
- Develop performance measurement systems for all programs and evaluate their current status;
- Increase assessments and recovery of restitution fines and orders;
- Continually evaluate claims and disposition processing methodologies and redesign the processes as necessary, and design an integrated process for identifying and measuring effectiveness of services delivered for the resources expended.
- Create new and enhance existing public and private partnerships;
- Develop a process for implementing continuous quality improvement;
- Recruit, Train, and Retain Quality Staff;
- Promote job satisfaction

and high morale;

- Assess and implement opportunities for future use of funds;

- Identify and respond to emerging trends, technologies, and issues at federal, state and local levels that affect Board processes.

Values

Values direct the Board's activities toward realizing the vision and fulfilling the mission. These include communication; compassion; consistency; cooperation; customer first; excellence; financial security; leadership; respect; responsibility and accountability.

The Plan will continue to evolve incrementally to accommodate ongoing change and growth.

"DERIVATIVE VICTIMS"

Continued from Page 3

deadline. However, in keeping with the intent of the new process, the Board requests that derivative victims only file applications when crime related expenses have been incurred, are imminent, or when it is a derivative victim's only means of meeting the filing deadline.

A derivative victim for whom the filing deadline has not been "tolled" may file an application after the filing deadline for consideration for late acceptance by the Board.

TRAINING WORKSHOPS FOR VOCP STAFF

According to the United States Surgeon General, domestic violence is the greatest cause of injury among women in the United States.

Statistics indicate that 22% to 35% of the women arriving in medical emergency rooms are there because of symptoms related to on-going abuse. This represents more emergency room visits than auto accidents, mugging and rape combined.

Women Escaping a Violent Environment (WEAVE) is an organization established in 1978 to reduce victim trauma, promote recovery, and decrease the incidence of domestic violence and sexual assault. It is supported through government grants and donations. Some of the services provided by WEAVE include:

- Legal Advocacy
- Counseling
- Rape Crisis Service
- Community Education and Prevention



Recently, VOCP staff attended a training workshop presented by **Shireen Miles**, Director of Community Outreach for WEAVE. Ms. Miles supervises Sacramento County's crisis line, which receives over 23,000 calls each year. She is also a member and supervisor of the Sexual Assault Response Team (SART) that is dispatched to hospitals 24 hours a day to provide support to sexual assault victims and their families. Another speaker at the workshop was **Kathy Kelvington**, who related her own experience and trauma as a victim of violent crime, and how it has affected her life.

The workshop focused on the trauma and crisis experienced by victims and the common psychological effects of violent crime, including Post Traumatic Stress Disorder. It also provided information regarding different behaviors that form a cycle of violence and the dynamics that keep the cycle in motion. To ensure that VOCP staff possess the professional skills, knowledge and sensitivity needed to serve victims, staff will be attending training workshops that focus on a variety of issues affecting victims.

The workshops will include presentations by victims and various victim service organizations to provide insight on the impact of crime. The Board plans to conduct these workshops on a quarterly basis consistent with the Board's goal to provide an environment that promotes and supports continuous learning for sound decision making.

REIMBURSEMENT POLICY CHANGES

Historically, as the payer of last resort, the VOCP has applied sick leave as a reimbursement source for income and support loss claims. However, various types of benefit packages now offered by employers make it difficult for VOCP staff to verify whether compensation paid by the employer during an employee's absence is for sick leave, vacation, or other time-off provisions.

To ensure fairness and consistency among all claims, **sick leave will no longer be applied as a reimbursement against income and support loss claims.**

The Board's management staff also re-examined its policy regarding the application of life insurance as a reimbursement source against support loss, funeral burial and mental health claims. They found that it is difficult for VOCP staff to determine the purpose of various life insurance policies.

In order to streamline payment of these claims and ensure fairness to victims, **general life insurance proceeds will no longer be applied as a reimbursement source.**

However, insurance that specifically pays only for funeral/burial expenses will continue to be applied as a reimbursement source against funeral/burial claims.

NEW DEPUTY EXECUTIVE DIRECTOR DAVID R. SHAW

Committed to placing a renewed emphasis on victims rights and providing innovative and quality services to victims, David R. Shaw began his appointment as the VOCP's Deputy Executive Director in January 1999.

The vast experience, education and skills that Mr. Shaw brings to the position of Deputy Executive Director will be a major asset to the VOCP. Mr. Shaw has worked with victims throughout his extensive career in the criminal justice field and will fully integrate this experience into the duties of his new position.

Under his direction, the VOCP will focus on providing more responsive and expeditious services to victims and increasing outreach activities by networking with individuals and organizations that serve victims.

Another focus will be on the implementation of work improvement processes consistent with the VOCP's new Strategic Plan. This includes the elimination of redundant activities that adversely impact the timeliness in claims processing.

Prior to this appointment, Mr.

Shaw was the former Executive Director of the Office of Criminal Justice Planning (OCJP) and Chief Legal Counsel to the California Assembly Committee on Public Safety during the 1995/96 Legislative Session.

He was a Deputy District Attorney with the Sacramento County District Attorney's Office from 1987-1995 and was cross-designated as a Special Assistant United States Attorney for the Eastern District of California from 1994 to 1995. His last assignment for Sacramento County was as the Lead Deputy in the Career Criminal Prosecution Unit from 1992-1995.

Mr. Shaw served as a reserve police officer and firearms instructor with the City of Lone Police Department from 1981 to 1995 and with City of Jackson Police Department from 1995 to the present.

He was commissioned as an Army Reserve Officer in 1982 from the ROTC Program at UC Davis/CSUS and served on active duty in the United States Army as an airborne infantryman with the 82nd Airborne Division from 1975 through 1978.

He is currently a Major in the United States Army Reserve, where he is the Operations Officer for the 368th Military Intelligence Battalion, Oakland, CA. He is also an Adjunct

Professor of McGeorge School of Law and a member of the McGeorge Alumni Advisory Committee to the Governmental Affairs Program, the Sacramento Federalist Society and past treasurer of the Sacramento County Attorney's Association.

Mr. Shaw earned a bachelor's degree in Criminal Justice, with Honors from California State University, Sacramento, in 1982 and a Juris Doctorate degree, with Distinction, from McGeorge School of Law in 1987.

He is also a graduate of the United States Army Intelligence School and was the 1998 Distinguished Graduate of the Army Command and General Staff College.

On a personal note, Mr. Shaw is married and has a nine year old daughter. He enjoys teaching, and is an avid runner.

With his leadership, support, and his commitment to victims, the VOCP will meet the challenges associated with providing optimum customer service and improving the VOCP's internal operations.



DRUNK DRIVING IS A VIOLENT CRIME

About three in every five Americans will be involved in an alcohol related crash at some time in their lives.

Statistics indicate that every weekday night from 10 p.m. to 1 a.m., one in 13 drivers is drunk (blood alcohol level of .08 or more.) Between 1 a.m. and 6 a.m., one in seven drivers is drunk.

Mothers Against Drunk Driving (MADD) is a non-profit organization with more than 600 chapters nationwide. MADD works hard to stop drunk driving and save lives, but when a life is destroyed, MADD is there to provide assistance.

The number-one priority of MADD is victim advocacy. The Sacramento/Placer County chapters have two trained victim advocates who work with victims of impaired driving. MADD's advocates provide emotional support to victims and often accompany them to court and help with their victim impact statements. They also hold an annual Candlelight Vigil and participate in Victim's Rights Week observance.

MADD provides literature tailored to victim's needs, including information on State Victim Rights and compensation available from the VOCP. They also serve as liaison between victims and the criminal justice process.

The advocates refer victims to professional counselors, civil attorneys and clergy who are skilled at working with victims. MADD also gives various presentations to community organizations and strives to educate the public in the seriousness and dangers of driving under the influence.

Because of the efforts of groups like MADD, some 1600 new drunk driving laws have been passed nationwide since 1980. The justice system is holding people accountable for the damage they do to innocent victims who are killed or injured as a result of alcohol abuse.

Only through such proactive programs will people understand that the intelligent choice is **"if you drink, don't drive."**



**"MADD EXISTS
BECAUSE THOSE
WHO DRINK AND
DRIVE CONTINUE
TO KILL AND
INJURE
INNOCENT
PEOPLE"**

INCOME/SUPPORT LOSS CHANGES

The VOCP is currently working to streamline and simplify the processing of income and support loss payments. A new process has been developed whereby income and support loss payments will be calculated based on a simplified tax table approach.



The new process will also require changes to the VOCP's computer system that are currently in the programming stages. It is anticipated that the modifications will be completed by the end of August 1999.

By implementing these changes, the following benefits will be realized:

- Simplified processing procedures by eliminating the need for staff to manually calculate the income/support loss amount;
- Decreased processing time and error rates;
- Reduced chance of future overpayments that would have to be collected from victims.



NEW TRAINING PROJECTS

The VOCP's Program, Education and Training Section has recently undertaken several new projects. These include:

• Developing a CD-ROM tutorial that teaches claims processing staff how to effectively use and navigate through the VOCP's **VOX** computer system;

• Creating video tapes and CD-ROM on various topics such as domestic violence and legislation. The tapes will be available to Victim/Witness Assistance Centers and VOCP staff for training purposes;

• Providing all Victim/Witness Assistance Centers with access to the **VOX** Claims Activity Summary screens that provide more concise and

condensed information. A training video has been created that explains what information can be accessed;

• Developing a file management process that will increase consistency and efficiency in the processing of VOCP claims. This includes standardizing and updating the various forms used by claims processing staff and re-evaluating the current system and develop methods to improve the organization and timeliness of claims processing;

• Providing training for mental health providers on the NPA process and conducting training for VOCP staff on the new method for processing income/support payments.

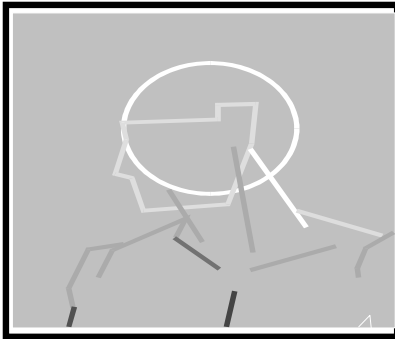
"Gang Violence"

Continued from Page 1

General Janet Reno presented Supervisor **Christine Lopez** and the Program's Executive Director, **Margot Carlson**, with the 1997 National Crime Victim Services Award, which is the highest federal honor given for crime victim advocacy.

The Quarterly would like to recognize dedicated Program staff **Marco Renteria, Myhanh Nguyen, Louis Mendez, Fernando Orozco, Martha Cruz-Pelayo, and Frank Carrillo**. These Victim Specialists provide an invaluable service to their community.





The QAMH READER

An Insert Publication of the Quality Assurance Mental Health Unit
of the Victims of Crime Division, State Board of Control

Insert No. 2

The QAMH READER is an insert publication of the Quality Assurance Mental Health Unit of the Victims of Crime (VOC) Program, State Board of Control

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Standards of Care Task Force Update

The Victims of Crime Program's (VOCP) Standards of Care Task Force (SOCTF) is continuing its work toward completion of the document which will make recommendations for mental health practice standards for the treatment of child trauma victims. The SOCTF has continued to meet on a monthly basis to discuss both issues relevant to this effort as well as to meet in small focused writing groups. Currently, primary chapter writers are completing enhanced outlines of their chapters, or have begun writing of the actual chapters.

At the most recent meeting on June 18, 1999, in Los Angeles, new SOCTF member Elsa Ten Broeck, MSW was introduced. Ms. Ten Broeck is an expert in the area of Child Protective Services, and will be contributing in that area.

See SOCTF, back page

Victims of Crime Program Database Research Project

The Board of Control's (BOC) Victims of Crime (VOC) Division is currently conducting research utilizing the program's extensive database to explore a variety of issues. These issues include those of clinical interest (treatment outcome) and those of fiscal concern (funding usage patterns).

The VOC Database Research Project (DRP) intends to yield findings

which are useful not only to the VOC, but ultimately, to many of the VOC's interested parties.

Previously, the DRP work group gathered and analyzed preliminary data that produced valuable information regarding program funding usage for mental health treatment.

Currently the DRP work group is in the process of bringing in psychology interns to assist in further research efforts which requires analysis of program data which is not currently collected



See DRP, back page

Post Traumatic Stress Disorder

This 3-part article on Post Traumatic Stress Disorder (PTSD) is the second in a series of articles to appear in the QAMH READER focused on diagnoses frequently seen in VOCP mental health claims.

This is the first of a 3-part article on Post-Traumatic Stress Disorder (PTSD). Part I describes the recent history of attempts to understand the nature of the emotional trauma caused by stress, leading up to the formulation of the PTSD diagnosis in 1980. Part II will describe in more detail the causes and prevalence of the disorder in adults and changes in the criteria for diagnosis that were introduced in 1996. Part III will describe the same for children as there are differences between the typical child and adult responses.



Persons who experience traumatic events, physical or emotional, can manifest a variety of symptoms. The intensity and extent of those symptoms will vary from person to person, depending in part on the severity of the trauma and in part on individual vulnerabilities. Traumas which are life threatening, and/or prolonged are apt to produce more severe symptoms. What makes one person more vulnerable to developing severe symptoms than another person who experiences the same kind of trauma is a question that is being actively researched. Studies of twins suggest that about 1/3 of the

variation in individual responses is accounted for by genetic factors. Other factors which can influence individual vulnerability are age, a history of drug or alcohol dependence, and, of course, a history of prior trauma.

When symptoms from a trauma persist and begin to interfere with a person's daily functioning, they can be said to constitute a "mental disorder". The first diagnostic manual published by the American Psychiatric Association in 1952 termed the mental disorder that might follow from exposure to a traumatic event as a "traumatic neurosis". The use of the term "neurosis" in that context emphasized the contribution of a person's own history, especially childhood history, in the development of the disorder. That emphasis reflected the observation, for example, that not all soldiers who had the same combat experiences were equally vulnerable to "battle fatigue" or "shell shock," lay terms for what in fact often was "traumatic neurosis." That emphasis on individual vulnerability was maintained when the diagnostic manual was revised in 1968. The stress reaction to trauma was then classified as an "adjustment reaction" or a "transient situational disturbance that would pass if it were not for other factors." [emphasis added]

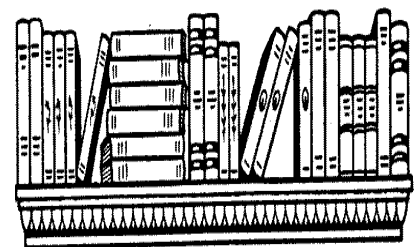
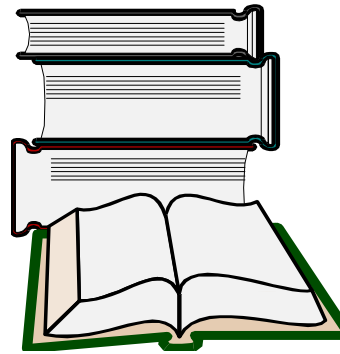
As studies of trauma victims continued, some things were learned which began to shift the

emphasis from the significance of a person's individual history/vulnerability to the significance of the severity of the trauma itself. One of those things learned was that a substantial number of Vietnam veterans

were manifesting a specific "syndrome" of symptoms. (A syndrome is a collection of symptoms which occur together). The fact that this syndrome was similar across

a wide variety of individuals suggested that there might be trauma, at least severe trauma, that was a fundamental human response independent of genetic variability and individual histories. Military personnel who served in Vietnam were more likely to suffer from this particular syndrome than those who didn't. A study of twins, one of whom served in Vietnam and one who didn't, showed that the Vietnam veteran had an occurrence rate of the syndrome that was almost 4 times higher than for the non-Vietnam twin; 9 times higher if the Vietnam experience included heavy combat. These and many similar findings strongly indicated that

See PTSD, back page



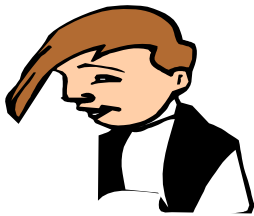
Quarterly Research Features

Somatization In Adolescents: "Red Flag"?

The following is a summary of an article, which appeared in the online publication, Medscape on June 14, 1999.

A recent Canadian study now suggests that high levels of somatization in adolescents may be an early signal of future major depression in young adulthood. [Editor's note: Somatization is the process whereby emotional distress is expressed through bodily, or somatic, means, eg. gastrointestinal or pseudoneurological complaints. It is also a common presentation in children and adolescents who are victims of trauma.]

The study, based in Hamilton, Ontario, Canada at McMaster University examined the link between somatization and major depression in a 4-year study. The study involved more than 1,000 adolescents aged 13 to 16 years at the beginning of the study.



"One possible explanation for this finding is that somatization is, in fact, a variable or alternative expression of emotional disorder in adolescents," according to study director Dr. Lonnie Zwaigenbaum and his colleagues in their article in the June issue of Pediatrics.

Children above the 90th percen-

tile for somatization symptoms at baseline were significantly more likely to develop and be diagnosed with major depression 4 years later. Adolescents in that percentile who were without typical signs or symptoms of emotional disorders at baseline were at the highest level of risk, according to the study. These findings occurred despite gender, sociodemographics or the presence or absence of chronic health problems. Additionally, highly somatizing adolescents were at greater risk



for panic attacks at follow-up. In short, the findings indicate that "...pronounced polysymptomatic somatization is clearly not a benign presentation, and should send a warning that

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Prolonged Stress Impairs Short-Term Memory

The following is a summary of an article, which appeared in the online publication, Medscape on June 22, 1999.

In an article recently published in Rueters Health, Dr. John W. Newcomer, of Washington University, stated that he and colleagues at the university have found that cortisol (a hormone found in the adrenal gland responsible for metabolic regulation) levels associated with high levels of physical or psychological stress can have a "clini-

cally significant" negative effect on verbal declarative memory.

(Editor's note: Under stress, the hypothalamus in the brain sends a message to the pituitary gland which stimulates the adrenal cortex to secrete cortisol. One of the effects of cortisol is to cause cell death and shrinkage in the hippocampus, which can contribute to memory problems and difficulty with new learning.)

Researchers found that only longer term (4 days) exposure to very high levels of cortisol produced the memory impairment. Equally important was the finding that the impairment was fully reversible after a 1-week washout period.

The study examined cognitive functions in 51 healthy men and women after they had recieved placebo or cortisol doses associated with mild and major stress for 4 days. Only those subjects who recieved the higher doses demonstrated a decline in cognitive function. Specifically, this decline effected verbal declarative memory, or the ability to learn new verbal information. The impairment disappeared within 6 days of discontinuing the cortisol treatment.

The cortisol levels which were studied were meant to mimic the natural response to physical stresses such as surgery or medical illness, and psychological stresses from fairly extreme mental trauma. Individuals with a constitutionally heightened response to cortisol may experience the memory deficits at

See Stress, back pg.

PTSD, Cont'd from pg.2

trauma severity was a significant factor in the development of the syndrome.

A second finding was that Vietnam veterans who suffered from this syndrome also showed some interesting differences in their "brain chemistry." Persons who suffered from the syndrome tended to have neurophysiologic responses to stress that were different from those who didn't suffer from the syndrome. Those responses affected such things as blood pressure and resting heart rate; they were mediated by an elevation in neurotransmitters which are known to effect alertness to changes in the environment, general physical arousal and the emotional responses which are associated with arousal, the "storage" of emotionally significant memories, and the ability to sequence and recall such memories in a coherent manner.

These findings gave further weight to the idea that apart from the contributions of genetics and individual histories, there was a fundamental human response to the trauma of stress, and that this response could have lasting effects on brain chemistry, which would in turn influence a person to continue to act as though the threat still existed.



A third finding was that the collection of symptoms believed to be a reaction to stress in combat veterans could also be observed in a substantial number of victims of assault and rape.

SOCTF, Cont'd from pg. 1

Also discussed at this meeting was the issue of youth/school violence. In light of recent national events, this topic generated much discussion, and issues for future meetings. There appeared to be a general consensus to obtain additional expert consultation on this matter.

The SOCTF's next meeting will be on August 20, 1999 in San Diego.

DRP, Cont'd from pg. 1

in a form which is amenable to numeric analysis.

There is currently an on-going recruitment effort for Research Assistants in the Sacramento/Davis area to assist in this stage of our research. This unique opportunity could give students valuable experience by taking part in this large database project. Research Assistants may earn units through their respective Psychology departments.

Interested parties may contact Brian Lew at (916) 323-2665, Or e-mail at Blew@boc.ca.gov.

Ideas For Future Articles?

The QAMH READER

welcomes suggestions and ideas for future articles. Please submit suggestions and ideas to the Newsletter Coordinator, Brian Lew, at (916) 323-2665, Fax at (916) 323-2953, or e-mail at Blew@boc.ca.gov.



Red Flag, cont'd from pg. 3

serious emotional morbidity may soon surface," according to the investigators.

It was recommended by the investigators that special care be taken to follow-up with high-risk patients as they transition from pediatric care.

The full study can be found in the June 1999 issue of *Pediatrics*.

Stress, Cont'd from pg. 3

lower levels of stress.

Important implications from this work include the conclusion that doctors, law enforcement and others who interact with trauma victims, should be aware that these victims may be less capable in understanding new information after sustained high-stress.

The full study can be found in the June 1999 issue of *Archives of General Psychiatry*.